IN THE U.S. PATENT AND TRADEMARK OFFICE	,
DECLARATION AND POWER OF ATTORNEY	ATT. DOCKET NO. 11957/47204

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter that is claimed and for which a patent is sought on the invention entitled COMPOSITION AND METHOD FOR FACILITATING BONE HEALING, the specification of which was filed as International Application No. PCT/EP2004/006841 on June 24, 2004, and for which an application for Letters Patent was filed with the U.S. Patent and Trademark Office on March 6, 2006 under U.S. Application Serial No 10/570,735; and

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a) including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

PRIOR UNITED STATES APPLICATION(S)

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s), or §365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

APPLICATION NUMBER	FILING DATE (day, month, year)	STATUS (i.e. Patented, Pending, Abandoned)
10/657,019	05-09-2003	Pending

I declare that all statements made herein of my own knowledge are true and all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under § 1001 of Title 18 of the United States Code and that such willful statements may jeopardize the validity of the application or any patent issuing thereon.

	FAMILY NAME	FIRST GIVEN NAME		SECOND GIVEN NAME
FULL NAME OF INVENTOR	NETKE	Shrirang		
RESIDENCE & CITIZENSHIP	ату	STATE OR POREIGN CO	UNTRY	COUNTRY OF CITIZENSHIP
	San Bruno	California		United States
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY		STATE & ZIP CODE/COUNTRY
	Evergreen Ridge Apt., J10	San Bruno		California 94066 USA
Signature 5	Netke		Date	8-3-06

FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	NIEDZWIECKI	Aleksandra	
RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTR	Y COUNTRY OF CITIZENSHIP
	San Jose	California	United States
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	1394 Heckman	San Jose	California 95129 USA
Signature	Meul	Da	te 8-3-06

FULL NAME OF	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
INVENTOR	RATH	Matthias	
RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	Capetown	South Africa	Federal Republic of Germany
POST OFFICE ADDRESS	POST OFFICE ADDRESS	СІТУ	STATE & ZIP CODE/COUNTRY
	34 Bree Street, 15th Floor	Capetown	South Africa 8001
Signature	Mary Par	Date	July 29 7006
	V		

FULL NAME OF	PAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
INVENTOR	ROOMI	Waheed	
RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	Sunnyvale	California	United States
POST OFFICE ADDRESS	POST OFFICE ADDRESS	СПУ	STATE & ZIP CODE/COUNTRY
	983 La Mesa Terrace #E	Sunnyvale	California 94086 USA
Signature	Hija	Date	8.16.06
	X		

FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	IVANOV	Vadim	
RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	Castro Valley	California	United States
POST OFFICE ADDRESS	POST OFFICE ADDRESS	стту	STATE & ZIP CODE/COUNTRY
	6535 Ridgewood Drive	Castro Valley	California 94552 USA
	Lim Ivano	Dete	8. (6.06

FULL NAME OF	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
INVENTOR	NIEDZWIECKI	Aleksandra	
RESIDENCE &	СТУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
CITIZENSHIP	San Jose	California	United States
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	1394 Heckman	San Jose	California 95129 USA
Signature	Allee	Date	Ane 3/2001